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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Adrienna First name S Middle name	First name Middle name
	identification to your meeting with the trustee.	Thomas Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Adrienna Thomas	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7075	

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Debtor 1 Adrienna S Thomas

Case number (if known)

		About Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):				
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Bus	siness name(s)				
		EINs	EIN	is				
5.	Where you live	17253 Park Avenue	If D	ebtor 2 lives at a different address:				
		Chicago, IL 60630 Number, Street, City, State & ZIP Code	Nur	mber, Street, City, State & ZIP Code				
		Cook	INGI	nibel, Street, Oity, State & Zir Gode				
		County	County					
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code	Nur	mber, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choosing this district to file for		Check one:	Che	eck one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Adrienna S Thomas

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under			ief description of each, see <i>Notice R</i>	Peguired by 11 LLS C. &	242/h) for Individuals Filing for Bonker into			
	choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	-	■ Cha	pter 7						
		☐ Cha	pter 11						
		☐ Cha	pter 12						
		☐ Cha	pter 13						
8.	How you will pay the fee	al	bout how yo	I pay the entire fee when I file my petition. Please check with the clerk's office in your local count how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's If your attorney is submitting your payment on your behalf, your attorney may pay with a credit exprinted address.					
						attach the Application for Individuals to Pay			
			•	e in Installments (Official Form 103A) my fee be waived (You may reques		are filing for Chapter 7. By law, a judge may,			
		bı aj	ut is not req pplies to you	ired to, waive your fee, and may do	so only if your income is ay the fee in installment	s less than 150% of the official poverty line that its). If you choose this option, you must fill out			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District	When		Case number			
			District	When		Case number			
			District	When		Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.							
	affiliate?		5.17			B. I. W. A.			
			Debtor	When		Relationship to you			
			District Debtor	Wrien	-	Case number, if known Relationship to you			
			District	When		Case number, if known			
11.	Do you rent your residence?	■ No.	Go to I	ne 12.					
	. 55.46.166 1	☐ Yes.	Has yo	ır landlord obtained an eviction judgr	ment against you and do	you want to stay in your residence?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statement About a</i> bankruptcy petition.	an Eviction Judgment A	gainst You (Form 101A) and file it with this			

Document Page 4 of 64 Case number (if known) Debtor 1 Adrienna S Thomas Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Adrienna S Thomas

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Adrienna S Thomas Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100.001 - \$500.000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion ■ \$0 - \$50.000 estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Adrienna S Thomas Signature of Debtor 2 Adrienna S Thomas Signature of Debtor 1 Executed on April 19, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Adrienna S Thomas Document Page 7 of 64 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nella E. Mariani	Date	April 19, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
Nella E. Mariani			
Printed name			
The Law Offices of Nella E. Mariani, P.C.			
Firm name			
600 S County Line Road, Suite 2N			
Bensenville, IL 60106			
Number, Street, City, State & ZIP Code			
Contact phone (312) 307-9411	Email address	nellaep@aol.com	
6257570			
Bar number & State			

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Deb	tor 1 Adrienna S Thoma	as		Case numb	er (if known)			
Par	6: Answer These Questi	ions for R	eporting Purposes					
	What kind of debts do you have?	16a.		onsumer debts? Consumer debts are de sonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily be money for a business or inve	usiness debts? Business debts are debts estment or through the operation of the bu	s that you incurred to obtain siness or investment.			
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you o	owe that are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expens are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000			
	you estimate that you owe?	☐ 50-99)	☐ 5001-10.000	<u> </u>			
	owe.	□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$	650.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
	be worth:		,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
				7				
20.	How much do you estimate your liabilities	□ S0 - \$	\$50,000 001 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10.000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	to be?	_	,001 - \$500,000	☐ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion			
		□ \$500,001 - \$1 million		☐ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have e	xamined this petition, and I de	clare under penalty of perjury that the info	rmation provided is true and correct.			
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I d	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	t relief in accordance with the	chapter of title 11, United States Code, sp	ecified in this petition.			
		l undersi bankryp and 357,	tcy case can result in fines up	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519			
	(_	Adrien	na S Thomas re of Debtor 1	Signature of Debt	or 2			
		Execute	d on April 19, 2016 MM / DD / YYYY	Executed on M	M / DD / YYYY			

		Docume	ent Page 9 of 6	4	
Fill in this inform	nation to identify your	case:			
Debtor 1	Adrienna S Thom	nas			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an amended filing
					amended ming

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	95,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,800.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	104,800.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	105,404.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	109,413.00
	Your total liabilities	\$	214,817.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,837.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,830.00
Paı	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Adrienna S Thomas Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,855.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	84,400.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	84,400.00

	Case 16-13261	Doc 1		04/19/16 ument	Entered 04/19/2 Page 11 of 64	16 12:46	:05 De:	sc Main	ı
Fill in this	information to identify	your case and th			rade II or o-				
Debtor 1	Adrienna S 1		Name		Last Name				
Debtor 2 Spouse, if filin			Name		Last Name				
Jnited Stat	tes Bankruptcy Court for	the: NORTHER	N DISTI	RICT OF ILLIN	IOIS				
Case numb	per								ck if this is an inded filing
Sched each cated ink it fits b	est. Be as complete and a	operty escribe items. List a	e. If two	married people	n asset fits in more than on are filing together, both are	e equally resp	onsible for su	pplying cor	rect
nswer ever	ir more space is needed, a y question. scribe Each Residence, Bu	·			top of any additional page n or Have an Interest In	s, write your r	name and case	number (if	known).
☐ No. Go ☐ Yes. V	to Part 2. Where is the property?								
1.1	0 Davida Assassas		What	is the property	? Check all that apply				
17253 Park Avenue Street address, if available, or other description		Duplex or multi-unit building the amoun				educt secured claims or exemptions. Put int of any secured claims on Schedule D: Who Have Claims Secured by Property.			
Lans	ing IL State	60438-0000 ZIP Code		Manufactured of Land Investment pro	or mobile home	Current va entire prop \$\$		portion yo	alue of the ou own?
			□ □ Who	Timeshare Other has an interest Debtor 1 only	in the property? Check one	(such as fe	he nature of yoee simple, tende), if known.		
County	ζ			Debtor 2 only Debtor 1 and D At least one of	the debtors and another ou wish to add about this ite	(see ins	c if this is com structions)	munity prop	perty
			prope	ary identification	n namber.				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$95,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	otor 1	Case 16-13261 Adrienna S Thomas	Doc 1	Filed 04/19/16 Document	Entered 04/19 Page 12 of 64	0/16 12:46:05 ase number (if known)	Desc Main
3. C	ars. vai	ns, trucks, tractors, spor	rt utility vehi	cles. motorcycles		, , , ,	
	l No	,,		, ,			
	_						
	Yes						
3.1		0		Who has an interest in the	e property? Check one	the amount of any s	red claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.
	Mode Year:	···		■ Debtor 1 only □ Debtor 2 only			
		oximate mileage:	92,000	Debtor 1 and Debtor 2 of	only	Current value of the entire property?	ne Current value of the portion you own?
		r information:	,	☐ At least one of the debte	•		
	Fair	Condition (need tune	-up,			4	
	body	y work)		Check if this is commu	unity property	\$5,500.	95,500.00
				(see instructions)			
5 A		dollar value of the portion ou have attached for Pal					\$5,500.00
						_	
Do :	you ow	cribe Your Personal and H in or have any legal or ed bld goods and furnishing es: Major appliances, furnit	quitable inte	rest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	J No [′]	, , , ,		•			
	Yes.	Describe					
		Miscel	laneous Ho	ousehold Goods & Fu	ırnishings		\$2,150.00
E	No				oment; computers, printe	ers, scanners; music co	illections; electronic devices
E		oles of value es: Antiques and figurines; other collections, mem			oks, pictures, or other ar	t objects; stamp, coin,	or baseball card collections;
		Describe					
E	Example	ent for sports and hobbie es: Sports, photographic, e musical instruments		other hobby equipment;	bicycles, pool tables, go	lf clubs, skis; canoes a	nd kayaks; carpentry tools;
_	■ No □ Yes.	Describe					
10.	Firearm Examp	ns <i>les:</i> Pistols, rifles, shotgun	ıs, ammunitio	n, and related equipment	i .		
	■ No □ Yes	Describe					

Official Form 106A/B Schedule A/B: Property page 2

Dobtor 1	Case 16-13261	Doc 1	Filed 04/19/16 Document	Entered 04/19/16 12:46:05 Page 13 of 64	Desc Main
Debtor 1	Adrienna S Thomas			Case number (if known)	
□ No	es nples: Everyday clothes, furs, s. Describe	, leather coats	s, designer wear, shoes,	accessories	
	Necess	ary Wearin	g Apparel		\$600.00
■ No		ume jewelry,	engagement rings, wedd	ding rings, heirloom jewelry, watches, gems,	gold, silver
Exan ■ No	farm animals nples: Dogs, cats, birds, hors s. Describe	es			
14. Any c ■ No	other personal and househo	old items you	u did not already list, ir	ncluding any health aids you did not list	
☐ Yes	s. Give specific information				
	I the dollar value of all of yo Part 3. Write that number he		· · · · · · · · · · · · · · · · · · ·	ny entries for pages you have attached	\$2,750.00
Part 4: D	Pescribe Your Financial Assets				
Do you o	own or have any legal or eq	uitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No				osit box, and on hand when you file your petit	ion
			accounts; certificates of counts with the same inst	of deposit; shares in credit unions, brokerage titution, list each.	houses, and other similar
_	S		Institution n	ame:	
	17.1.			& Savings Accounts (Bancorp & uto Union Credit Union)	\$50.00
Exan ■ No	ls, mutual funds, or publicly inples: Bond funds, investmen		ith brokerage firms, mon	ey market accounts	
joint	publicly traded stock and ir venture	nterests in in	corporated and uninco	orporated businesses, including an interes	st in an LLC, partnership, and
■ No □ Yes	s. Give specific information a Nam	bout them e of entity:		% of ownership:	
Nego	•	rsonal check	s, cashiers' checks, pror	egotiable instruments missory notes, and money orders. by signing or delivering them.	
_	s. Give specific information ab	oout them er name:			

Case 16-13261 Doc 1 Filed 04/19/16 Entered 04/19/16 12:46:05 Desc Main Document Page 14 of 64 Case number (if known) Debtor 1 **Adrienna S Thomas** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: \$1.500.00 401K Plan Through Employer 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

Official Form 106A/B

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary: Surrender or refund

	Case 16-13261	Doc 1	Filed 04/19/16 Document	Entered 04/19/16 12:46:05 Page 15 of 64	Desc Main
Debtor 1	Adrienna S Thomas			Case number (if known)	
					value:
If you a someon	erest in property that is dare the beneficiary of a living ne has died. Give specific information			d surance policy, or are currently entitled to rec	eive property because
Examp ■ No	against third parties, who les: Accidents, employmen Describe each claim			t or made a demand for payment to sue	
■ No	contingent and unliquidate Describe each claim	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
■ No	ancial assets you did not Give specific information	already list			
	he dollar value of all of your tall of your 4. Write that number he			ny entries for pages you have attached	\$1,550.00
Part 5: Des	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37. Do you o	own or have any legal or equi	table interest	n any business-related pr	roperty?	
No. Go	to Part 6.				
☐ Yes. G	to to line 38.				
	scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.	
	own or have any legal or Go to Part 7.	equitable in	terest in any farm- or c	commercial fishing-related property?	
☐ Yes.	Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Did	Not List Above	

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 Adrienna S Thomas

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$95,000.00
56.	Part 2: Total vehicles, line 5	\$5,500.00		
57.	Part 3: Total personal and household items, line 15	\$2,750.00		
58.	Part 4: Total financial assets, line 36	\$1,550.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$9,800.00	Copy personal property total	\$9,800.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$104,800.00

Official Form 106A/B Schedule A/B: Property page 6 Filed 04/19/16 Entered 04/19/16 12:46:05

	C	13E 10-13201 DUC 1	Document		Page 17 of 64	J.03 D	CSC Main
Fill	in this infor	nation to identify your case:	Bocamen		auc 17 or 04		
Deb	otor 1	Adrienna S Thomas					
			Middle Name	L	ast Name		
	otor 2 use if, filing)	First Name	Middle Name	L	ast Name		
Unit	ted States Ba	nkruptcy Court for the: NOR	THERN DISTRICT OF	ILLIN	OIS		
Cas (if kn	se number _ own)						Check if this is an amended filing
		<u>rm 106C</u> e C: The Prope	rty You Cla	aim	as Exempt		4/16
the p	roperty you l	isted on <i>Schedule A/B: Propert</i> y ad attach to this page as many c	(Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you ge as necessary. On the top of any	claim as ex	empt. If more space is
spec any und exer	cific dollar a applicable s Is—may be u nption to a p	mount as exempt. Alternativel tatutory limit. Some exemptio inlimited in dollar amount. Ho	y, you may claim the t ns—such as those for wever, if you claim ar	full fai r healt n exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain be aption of 100% of fair market valu letermined to exceed that amoun	ing exemp enefits, an e under a l	ted up to the amount of d tax-exempt retirement aw that limits the
Par	t 1: Identi	fy the Property You Claim as	Exempt				
	_	f exemptions are you claiming aiming state and federal nonbar	•	•			
	☐ You are c	aiming federal exemptions. 11	U.S.C. § 522(b)(2)				
		perty you list on Schedule A/E		empt.	fill in the information below.		
	Brief descript	ion of the property and line on	Current value of the		ount of the exemption you claim	Specific la	ws that allow exemption
	Scnedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	17253 Park Cook Cour	Avenue Lansing, IL 60438	\$95,000.00		\$15,000.00	735 ILC	S 5/12-901
		hedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	Miscellane Furnishing	ous Household Goods &	\$2,150.00		\$2,150.00	735 ILC	S 5/12-1001(b)
	_	hedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
		Wearing Apparel	\$600.00		\$600.00	735 ILC	S 5/12-1001(a)
	Line nom Sc	TIGUUIG AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
		ming a homestead exemption djustment on 4/01/19 and every		′5?	· · · · · · · · · · · · · · · · · · ·	nt.)	

Official Form 106C

No

Yes

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

		Document	Page 1	8 of 64		
Fill in this inform	nation to identify you	r case:				
Debtor 1	Adrienna S Thor	mas				
Debiori	First Name		Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
Linita d Ctata a Daw	alamanatara Caramt familia	NORTHERN DISTRICT OF HILLIN	IOIC			
United States Bar	hkruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	1015			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
						
Official Form	106D					
Schedule	D. Creditors	Who Have Claims S	ecure	d by Property	,	12/15
<u> </u>	D. Orcartors	Wile Have Claims S		a by 1 Topolity	<u>'</u>	12/10
		f two married people are filing together out, number the entries, and attach it to				
. Do any creditors	have claims secured by	vour property?				
•	•	nis form to the court with your other s	chadulas '	Vou have nothing else to	report on this form	
			criedules.	Tou have nothing else to	report on this form.	
Yes. Fill in	all of the information b	pelow.				
Part 1: List All	I Secured Claims					
2. List all secured of	claims. If a creditor has m	nore than one secured claim, list the credi	tor separate	ly Column A	Column B	Column C
		a particular claim, list the other creditors i		Amount of claim	Value of collateral	Unsecured
much as possible, ils	st the claims in alphabetic	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Finan	cial	Describe the property that secures the	e claim:	\$8,896.00	\$5,500.00	\$3,396.00
Creditor's Name		2012 Chevrolet Sonic 92,000 i	miles			
		Fair Condition (need tune-up,	body			
		work)				
P O Box 3	80901	As of the date you file, the claim is: Chapply.	neck all that			
Bloomingt	ton, MN 55438	Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo	ortgage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla	aim relates to a	☐ Other (including a right to offset)				
community del	ot					
Date debt was incu	ırred	Last 4 digits of account number	er 7470			
Date dest mae mea			1470			
22 Ally Finan	cial	Describe the property that secures th	o claim:	¢0.00	Unknown	Unknown
2.2 Ally Finan Creditor's Name		Describe the property that secures the	e Ciaiiii.	\$0.00	Unknown	Unknown
Orealier 5 Harrie		Automobile (notice)				
200 Renais	ssance Center	As of the date you file, the claim is: Ch	neck all that			
Detroit, MI		apply. Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
	,	☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mo	ortgage or so	ecured		
Debtor 2 only		car loan)				
Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit	0			

 \square Check if this claim relates to a

community debt

☐ Other (including a right to offset)

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Debt	or 1	Adrienna S	S Thomas			Case number (if know)		
		First Name	Middle N	ame Last Name		•		
Date	debt	was incurred	Opened 11/19/11 Last Active 3/21/16	Last 4 digits of account number	7470			
2.3		rrington Mo vice	rtage	Describe the property that secures the c	laim:	\$96,508.00	\$95,000.00	\$1,508.00
	Credi	itor's Name		17253 Park Avenue Lansing, IL 60438 Cook County				
		00 S. Dougla aheim, CA 9		As of the date you file, the claim is: Check apply. Contingent	all that			
	Numl	ber, Street, City, S	tate & Zip Code	☐ Unliquidated				
Who	owe	s the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.				
		1 only 2 only		 An agreement you made (such as mortgoing car loan) 	age or s	ecured		
□ D	ebtor	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechani	c's lien)			
			tors and another	☐ Judgment lien from a lawsuit				
		if this claim re unity debt	elates to a	Other (including a right to offset)				
Date	debt	was incurred		Last 4 digits of account number	5770			
Δda	d the	dollar value of	vour entries in C	column A on this page. Write that number h	ere.	\$105,404.0	<u>n</u>	
If th	nis is		of your form, add	the dollar value totals from all pages.	0.0.	\$105,404.0	-	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 2	0 of 64	
Fill in this in	formation to identify your ca	ase:			
Debtor 1	Adrienna S Thoma	-			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS		
Case number (if known)	r				☐ Check if this is an amended filing
	orm 106E/F e E/F: Creditors Wh	no Have Unsecured	Claims		12/15
ny executory schedule G: Executed E: Execute	contracts or unexpired leases the xecutory Contracts and Unexpire reditors Who Have Claims Secur	nat could result in a claim. Also li ed Leases (Official Form 106G). D red by Property. If more space is a . If you have no information to rep ecured Claims	ist executory o not include needed, copy	contracts on Schedule A/B: Prop any creditors with partially secu the Part you need, fill it out, num	ORITY claims. List the other party to erty (Official Form 106A/B) and on red claims that are listed in ber the entries in the boxes on the of any additional pages, write your
■ No. Go					
☐ Yes.					
	st All of Your NONPRIORITY	Unsecured Claims			
	editors have nonpriority unsecu	red claims against you? t. Submit this form to the court with	your other sch	edules.	
unsecured	I claim, list the creditor separately f	ms in the alphabetical order of the for each claim. For each claim listed the other creditors in Part 3.If you have the other creditors in Part 3.If you have the other creditors in Part 3.	, identify what	type of claim it is. Do not list claims	already included in Part 1. If more
					Total claim
4.1 ACL	_	Last 4 digits of acc	ount number	0413	\$348.00
c/o / 3031	riority Creditor's Name Account Recovery Servic 1N. 114th St., Suite 2 vaukee. WI 53222	ee, Inc. When was the debt	incurred?		
Numb	oer Street City State Zlp Code incurred the debt? Check one.	As of the date you	file, the claim	is: Check all that apply	
■ De	ebtor 1 only	☐ Contingent			
□ De	ebtor 2 only	☐ Unliquidated			
□ De	ebtor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and anoth		ITY unsecure	d claim:	
☐ CI debt	heck if this claim is for a comm		ng out of a sen	aration agreement or divorce that yo	ou did not
Is the	claim subject to offset?	report as priority clai	ms		
■ No	0	☐ Debts to pension	or profit-sharii	ng plans, and other similar debts	
☐ Ye	es	Other. Specify			

Document Page 21 of 64 Debtor 1 Adrienna S Thomas Case number (if know) 4.2 Advocate Medical Group Last 4 digits of account number 5844 \$20.00 Nonpriority Creditor's Name 8550 W. Bryn Mawr, 8th Floor When was the debt incurred? Chicago, IL 60631 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.3 **Advocate South Suburban Hospital** Last 4 digits of account number 9214 \$264.00 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 4251 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Π Yes **Medical Bills** Other, Specify 4.4 All Kids and Familycare Last 4 digits of account number xxxkide \$75.00 Nonpriority Creditor's Name P.O. Box 19121 When was the debt incurred? Springfield, IL 62794 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans

■ No ☐ Yes report as priority claims

Other. Specify

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Document Page 22 of 64 Debtor 1 Adrienna S Thomas Case number (if know) 4.5 **American Family Insuance** Last 4 digits of account number 1544 \$137.00 Nonpriority Creditor's Name 975 N Nerge Road, Suite W30 When was the debt incurred? Roselle, IL 60172 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 AT & T Last 4 digits of account number 4576 \$356.00 Nonpriority Creditor's Name P.O. Box 5014 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 AT & T Uverse Last 4 digits of account number 4576 \$311.00 Nonpriority Creditor's Name c/o IC System When was the debt incurred? P.O. Box 64437 Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 16-13261 Doc 1 Filed 04/19/16 Entered 04/19/16 12:46:05 Desc Main Document Page 23 of 64 Debtor 1 Adrienna S Thomas Case number (if know) 4.8 **Barclays Bank Delaware** Last 4 digits of account number 2001 \$447.00 Nonpriority Creditor's Name Opened 11/01/13 Last Active PO Box 8803 When was the debt incurred? 3/21/16 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 Capital One Bank Usa N Last 4 digits of account number 7633 \$982.00 Nonpriority Creditor's Name Opened 2/01/15 Last Active 15000 Capital One Drive When was the debt incurred? 3/19/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1

Nonpriority Creditor's Name Opened 7/01/15 Last Active 15000 Capital One Dr When was the debt incurred? 3/19/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Last 4 digits of account number

4110

\$751.00

Capital One Bank Usa N

Entered 04/19/16 12:46:05 Case 16-13261 Doc 1 Filed 04/19/16 Desc Main Document Page 24 of 64 Debtor 1 Adrienna S Thomas Case number (if know) 4.1 **Cedar Financial** 9207 \$717.00 Last 4 digits of account number Nonpriority Creditor's Name 24009 Ventura Blvd Ste 2 When was the debt incurred? Opened 7/01/14 Calabasas, CA 91302 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other, Specify Collection Attorney Walden University ☐ Yes 4.1 **Chase Bank** \$350.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 15145 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Com-Ed Attn: Bankruptcv 7223 \$321.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2100 Swift Drive When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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4.1 4	Comcast	Last 4 digits of account number 8292	\$156.00
	Nonpriority Creditor's Name c/o Convergent P.O. Box 9004	When was the debt incurred?	
	Renton, WA 98057 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.1 5	Compton & Broomhead Dental	Last 4 digits of account number 3574	\$69.00
	Nonpriority Creditor's Name 901 Fran-Lin Parkway Munster, IN 46321	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
4.1 6	Credence Resource Management,	Last 4 digits of account number 2576	\$311.00
	Nonpriority Creditor's Name P.O. Box 2238 South rate MI 48105	When was the debt incurred?	
	Southgate, MI 48195 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify notice for AT & T Uverse	

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Credit One Bank NA	Last 4 digits of account number	6679	\$240.00
Nonpriority Creditor's Name Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 11/01/15 Last Active 3/20/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Dept Of Education/Nelnet	Last 4 digits of account number	3779	\$53,849.0
Nonpriority Creditor's Name 121 South 13th St Lincoln, NE 68508	When was the debt incurred?	Opened 12/01/13 Last Active 8/06/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	l .	
Dept Of Education/Neltnet Nonpriority Creditor's Name	Last 4 digits of account number	3679	\$30,551.0
121 South 13th St Lincoln, NE 68508	When was the debt incurred?	Opened 12/01/13 Last Active 8/06/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	☐ Other. Specify		

Debt	or 1 Adrienna S Thomas	Document Page 2	7 of 64 Case number (if know)	
4.2 0	Franciscan Alliance	Last 4 digits of account number	5720	\$5.00
	Nonpriority Creditor's Name 28044 Network Place Chicago, IL 60673	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	·		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	ls	
4.2	GAFCP	Last 4 digits of account number	7075	\$3,344.00
·	Nonpriority Creditor's Name 20 N. Wacker Drive, Suite 2275 Chicago, IL 60606	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	Great American Finance	Last 4 digits of account number	3130	\$2,350.00
	Nonpriority Creditor's Name	_		
	20 N Wacker Dr Ste 2275 Chicago, IL 60606	When was the debt incurred?	Opened 2/01/15 Last Active 3/19/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Miscellaneous Purchases

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Case number (if know) Document Debtor 1 Adrienna S Thomas

4.2 3	Great Lake Pathologists, SC Nonpriority Creditor's Name	Last 4 digits of account number 0237	\$74.00
	P.O. Box 78420	When was the debt incurred?	
	Milwaukee, WI 53278 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2 4	Heights Autoworkers Credit Union Nonpriority Creditor's Name	Last 4 digits of account number 6117	\$426.00
	21540 Cottage Grove	When was the debt incurred?	
	Chicago Heights, IL 60411		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify	
4.0			
4.2 5	Illinois Lending Corporation	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 100 West Randolph Chicago, IL 60601	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other. Specify loan	

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Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify legal fees

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Adrienna S Thomas

Adrienna S Thomas

Last 4 digits of account number 4092

4.2 9	Nicor	Last 4 digits of account number 4092	\$434.00
-	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 5407	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3 0	Pallotto Dental Care	Last 4 digits of account number 4700	\$69.00
	Nonpriority Creditor's Name 18610 Burnham Ave, #D Lansing, IL 60438	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Quest Diagnostics	Last 4 digits of account number 6500	\$209.00
	Nonpriority Creditor's Name P.O. Box 7306	When was the debt incurred?	
	Hollister, MO 65673 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Medical Bills	

Document Page 31 of 64 Debtor 1 Adrienna S Thomas Case number (if know) 4.3 **Quest Diagnostics** 4002 \$29.00 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 7306 When was the debt incurred? Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 Radiology Imaging Consultants, SC xxxxCO-OB \$17.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 75 Remittance Drive, Dept 1324 When was the debt incurred? Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Stat Anesthesia Specialists, LTD 3161 \$766.00 Last 4 digits of account number Nonpriority Creditor's Name 18221 Torrence Avenue, Suite 1B When was the debt incurred? Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only

Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify

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4.3 5	Storesmart Chicago Heights	Last 4 digits of account number 3112	\$284.00
	Nonpriority Creditor's Name 515 W. Lincoln Highway, Unit C Chicago Heights, IL 60411	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 6	TCF Bank Nonpriority Creditor's Name	Last 4 digits of account number 8878	\$9,148.00
	c/o Millennium Credit Consultants P.O. Box 18160 Saint Paul, MN 55118	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Women for Women Health Care, S.C.	Last 4 digits of account number 1039	\$168.00
	Nonpriority Creditor's Name P.O. Box 896 Richton Park, IL 60471	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	

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Debtor 1 Adrienna S Thomas

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Case number (if know)

S.C.	Last 4 digits of account number 0011	\$203.
Nonpriority Creditor's Name		
P.O. Box 896	When was the debt incurred?	
Richton Park, IL 60471 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 84,400.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,013.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 109,413.00

	btor 1 Adrienna S Thomas			
Fill in this infor	mation to identify your	case:		
Debtor 1	Adrienna S Thom	nas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
,	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,		- 10.10		

		Docume	ent Page 35 (of 64	
Fill in this	s information to identify yo	ur case:			
Debtor 1	Adrienna S Tho	amac			
Debior	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS		
O	atoo Damii apto, Gouit to: and				
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sched	dule H: Your Co	debtors			12/15
our name	e and case number (if know	he boxes on the left. Attach vn). Answer every question (If you are filing a joint case,			p of any Additional Pages, write
■ No					
■ No					
□ re	5				
		rou lived in a community pr na, Nevada, New Mexico, Pu			y states and territories include
■ No	. Go to line 3.				
		pouse, or legal equivalent live	e with you at the time?		
0	o. Dia your opouco, formor of	pouco, or logal oquivalent live	with you at the time.		
in line Form	e 2 again as a codebtor onl	ly if that person is a guaran	tor or cosigner. Make	sure you have listed the	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State an	d ZIP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	۵
0.1	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
	N 1			_	
	Number Street City	State	ZIP Code		
	Oily	Otato	211 0000		
				_	
3.2	Nama			Schedule D, lin	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street			<u> </u>	
	City	State	ZIP Code		

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	in this information to identify your captor 1 Adrienna S										
Del	btor 2	momus				_					
(Spo	ouse, if filing)										
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILL	INOIS		_					
Cas	se number					Check	if this is:				
(If kr	nown)							An amended filing			
									ent showing as of the follo		
\bigcirc	fficial Form 106I									ownig date	
	chedule I: Your Inc	am a					MI	M / DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment	r spouse is not filing wi	ith you, d	o not inclu	de infori	matio	on about	your spo	ouse. If mor	e space is	needed,
1.	Fill in your employment information.		Debtor	· 1				Debtor 2	or non-filir	ng spouse)
	If you have more than one job,	Employment status	■ Employed					☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed					☐ Not employed			
	employers.	Occupation	Case Manager								
	Include part-time, seasonal, or self-employed work.	Employer's name	The S	alvation A	rmy						
	Occupation may include student or homemaker, if it applies.	Employer's address		Christiana go, IL 606		ıe					
		How long employed to	here?	6 years	i			_			
Pai	rt 2: Give Details About Mor	nthly Income									
spoi If yo	mate monthly income as of the dause unless you are separated. but or your non-filing spouse have more space, attach a separate sheet to	ore than one employer, co	,	ŭ	•	Í	,		•	,	J
mor	e space, attach a separate sheet to	ulis loitii.					For Deb	tor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, saladeductions). If not paid monthly, or				2.	\$	3,	136.00	\$	N/A	<u>\</u>
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	<u>\</u>

3,136.00

N/A

Calculate gross Income. Add line 2 + line 3.

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Debte	or 1	Adrienna S Thomas	-	Case	number (if known)			
	Con	y line 4 here	4.	For \$	Debtor 1 3,136.00	For Deb	tor 2 or g spouse N/A	
			٦.	Ψ	3,130.00	Ψ	11/74	
5.		all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	565.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$ \$	0.00	\$	N/A	
	5u. 5e.	Insurance	5u. 5e.	\$ 	0.00 367.00	\$ 	N/A N/A	
	5f.	Domestic support obligations	5f.	\$ -	0.00	\$	N/A N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify: life insurance	5h.+	· .		+ \$	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$		\$	N/A	
				· —	939.00	· 		
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,197.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$ 	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		~	0.00	~	IVA	
		settlement, and property settlement.	8c.	\$	578.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: bonus	_ 8h.+	\$	62.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	640.00	\$	N/A	
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,837.00 + \$_	N.	/A = \$	2,837.00
	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	depen		•	ed in <i>Sche</i> d	dule J. 1. +\$	0.00
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies				, if it	2. \$	2,837.00
							Combin	
13.	Do y	vou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly	income

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Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Adrienna S	Thomas			Che	ck if this is:	
							An amended filing	
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter
(Spc	ouse, ii iiiiig)						13 expenses as or	the following date.
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
Sc	hedule	J: Your	Exner	1989				12/15
Be info	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	. If two married people anch another sheet to this				or supplying correct
Par 1.	Is this a join	ibe Your House	enold					
••	No. Go to							
	_		in a sonar	ate household?				
			iii a sepai	ate nousenoiu:				
		_	at file Offici	al Form 106J-2, Expenses	for Congrete House	shold of Dob	tor 2	
		es. Debioi 2 mus	st file Offici	ai Fulli 1005-2, Expenses	s тог зерага <i>се пои</i> зе	eriola di Deb	101 2.	
2.	Do you have	e dependents?	☐ No					
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		2 years	■ Yes
								□ No
					Daughter		9 years	■ Yes
								□ No
								☐ Yes
								□ No
•	D							☐ Yes
3.		enses include f people other t	han I	No				
		d your depende		Yes				
Est exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
Incl	lude exnense	s paid for with	non-cash	government assistance i	f vou know			
				cluded it on Schedule I:				
(Off	ficial Form 10	61.)				-	Your exp	enses
		_						
4.		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4. §	S	973.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	5	0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
	•	•		ıpkeep expenses		4c. \$	S	0.00
		owner's associat				4d. \$		0.00
5.	Additional n	nortgage paymo	ents for yo	our residence, such as ho	me equity loans	5. \$	5	0.00

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Debt	tor 1	Adrienna	a S Thomas	Case num	nber (if known)	
6.	Utiliti	ies:				
0.	6a.		heat, natural gas	6a.	\$	168.00
	6b.	-	ver, garbage collection	6b.		108.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.		110.00
	6d.	Other. Spe		6d.	· · · · · · · · · · · · · · · · · · ·	0.00
7.			ekeeping supplies		·	250.00
8.			hildren's education costs	8.	·	600.00
9.			ry, and dry cleaning	9.		10.00
		-	roducts and services	10.		0.00
			ntal expenses	11.	· -	0.00
			Include gas, maintenance, bus or train fare.	• • • • • • • • • • • • • • • • • • • •		0.00
12.			ar payments.	12.	\$	160.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			ributions and religious donations	14.		0.00
		rance.				
			surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	124.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines 4 or 20.			
	Spec			16.	\$	0.00
17.	Insta	illment or le	ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	\$	327.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did not report	tas		
			your pay on line 5, S <i>chedule I, Your Income</i> (Official Form 106	6 I). 18.		0.00
19.	Othe	r payments	s you make to support others who do not live with you.		\$	0.00
	Spec	·		19.		
20.			erty expenses not included in lines 4 or 5 of this form or on S			
			s on other property	20a.	·	0.00
		Real estat		20b.		0.00
			nomeowner's, or renter's insurance	20c.	·	0.00
	20d.	Maintenar	ce, repair, and upkeep expenses	20d.	·	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calc	ulato vour i	monthly expenses			
22.		•	through 21.		\$	2,830.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	2,830.00
				-2	<u> </u>	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,830.00
23.	Calc	ulate your	monthly net income.			J
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,837.00
			monthly expenses from line 22c above.	23b.	·	2,830.00
		1 7 7 - 41	, , ,	_50.	· —	
	23c.	Subtract y	our monthly expenses from your monthly income.			
			is your monthly net income.	23c.	\$	7.00
24.			an increase or decrease in your expenses within the year afte			
			u expect to finish paying for your car loan within the year or do you expect terms of your mortgage?	your mortgage	payment to increas	se or decrease because of a
			terms or your mongage:			
	■ No		[=			
	☐ Ye	es	Explain here:			

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Debtor 1 Adrienna S Thomas	Fill in this	information to identify your	case:			
Debtor 2 [Spouse if, Iffing] First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number [if known] Check if this is an amended filling Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. If our must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Signature of Debtor 2	Debtor 1	Adrienna S Thom	as			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Signature of Debtor 2						
Case number (It known) Check if this is an amended filing	(Spouse if, filir	ng) First Name	Middle Name	Last Name		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. If our must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1	United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1		ber				
Declaration About an Individual Debtor's Schedules 12/15 It wo married people are filing together, both are equally responsible for supplying correct information. If wo married people are filing together, both are equally responsible for supplying correct information. If wo married people are filing together, both are equally responsible for supplying correct information. If wo married people are filing together, both are equally responsible for supplying correct information. If wo married people are filing together, both are equally responsible for supplying correct information. If wo married people are filing together, both are equally responsible for supplying correct information. Sign Below Labeled Table 1. Sign Below Labeled Table 1. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice. Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1	(if known)					-
Declaration About an Individual Debtor's Schedules f two married people are filing together, both are equally responsible for supplying correct information. four must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Signature of Debtor 1						amended filing
Vou must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Signature of Debtor 1			n Individual	Debtor's Sc	hedules	12/15
■ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1 Signature of Debtor 2	years, or b	•	519, and 3571.	. ,	,	
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)	Did y	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1 Declaration, and Signature (Official Form 119) X /s/ Signature of Debtor 2	I	No				
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1 Signature of Debtor 2	п,	Yes. Name of person			Attach Bank	ruptcy Petition Preparer's Notice,
that they are true and correct. X /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 1 X Signature of Debtor 2	_	·			Declaration,	and Signature (Official Form 119)
Adrienna S Thomas Signature of Debtor 2 Signature of Debtor 1			that I have read the sum	mary and schedules file	d with this declaration	n and
Adrienna S Thomas Signature of Debtor 2 Signature of Debtor 1	X /s	s/ Adrienna S Thomas		X		
				Signature of	Debtor 2	
Date April 19 2016	Si	ignature of Debtor 1				
Date April 19, 2010	Da	ate April 19, 2016		Date		

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Fill in this informa	ation to identify your case:				
Debtor 1	Adrienna S Thomas	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Micdle Name	Last Name		
United States Bank	cruptcy Court for the: NO	RTHERN DISTRIC	T OF ILLINOIS		
Case number (f known)				☐ Check if t amended	
Official Form Declaration		Individua	I Debtor's Sche	dules	12/15
		· · ·			12/10
If two married peo	ple are filing together, bot	h are equally resp	onsible for supplying correct in	iformation.	
obtaining money o		nection with a bar		ing a false statement, concealing p is up to \$250,000, or imprisonment	
Sign I	3elow				
Did you pay	or agree to pay someone v	who is NOT an atto	orney to help you fill out bankru	uptcy forms?	
■ No					
☐ Yes. Na	me of person			Attach Bankruptcy Petition Preparetion, and Signature (Office	
that they are t	rue and correct.	have read the sur	mmary and schedules filed with X Signature of Debto		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date

Date April 19, 2016

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Fill i	n this inform	ation to identify you	r case:			
Debt		Adrienna S Tho				
2001		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
(if know	e number				-	Check if this is an mended filing
Ott:	isial Fam	···· 107				
	icial For		Affairs for Individ	luale Eiling for B	ankruntov	4144
						4/16
inforr	nation. If mo	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
numb	er (if known). Answer every que	stion.			
Part	1: Give Do	etails About Your Ma	rital Status and Where You	Lived Before		
1. \	What is your	current marital statu	ıs?			
[☐ Married					
ı	Not marr	ied				
2. [Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
ı	No					
[_	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	' .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
States	and territorie	os include Anzona, Ca	illorriia, idario, Lodisiaria, Ne	vada, New Mexico, Fuello Ni	co, rexas, washington and v	viscorisiri.)
I	■ No □ Yes. Mal	co ouro vou fill out Col	andula H. Vour Cadabtara (Ot	finial Form 106H)		
ı	Tes. Mai	ke sure you iiii out S <i>ci</i>	nedule H: Your Codebtors (Of	iiciai Form 106H).		
Part	2 Explain	the Sources of You	r Income			
F	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,334.00	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 43 of 64 Case number (if known) Document Debtor 1 Adrienna S Thomas

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inconcern Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to		r 31, 2015)	■ Wages, commissions, bonuses, tips	\$34,084.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
	r the calen anuary 1 to		efore that: r 31, 2014)	■ Wages, commissions, bonuses, tips	\$36,109.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
	and other winnings. List each s	public ben If you are f	efit payments; illing a joint cas I the gross inco	ner that income is taxable. Expensions; rental income; interest and you have income that your from each source separa	rest; dividends; money colle you received together, list it	ected from lawsuits; only once under De	royalties; and obtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inconstruction Describe below.		Gross income (before deductions and exclusions)
	om January e date you f		ent year until ankruptcy:	Child Support	\$1,869.00			
Pa	rt 3: List	t Certain P	ayments You	Made Before You Filed for	Bankruptcy			
6.	Are either	Neither [Debtor 1 nor D	's debts primarily consume bebtor 2 has primarily consu personal, family, or househo	u <mark>mer debts.</mark> Consumer del	ots are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During th	•	re you filed for bankruptcy, d	id you pay any creditor a to	tal of \$6,425* or mor	e?	
		□ Yes	List below e	each creditor to whom you pa editor. Do not include paymer payments to an attorney for t	nts for domestic support obl	e in one or more pay igations, such as ch	ments and the ild support a	he total amount you and alimony. Also, do
		* Subjec		t on 4/01/19 and every 3 year		n or after the date of	f adjustment	
	Yes.			r both have primarily consure you filed for bankruptcy, di		tal of \$600 or more?		
		■ No.	Go to line 7					
		□ _{Yes}	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor'	s Name a	nd Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for

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Case number (if known) Document Debtor 1 Adrienna S Thomas

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpo of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					al partner; corporations agent, including one for	
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment ditor's name
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures	P			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	No. Go to line 11.☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	i			ргорога
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institutior	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at		erty in the possess			efit of creditors, a
	☐ Yes					
Pai	List Certain Gifts and Contributions					
13.	■ No	tcy, did you give any gifts	s with a total value	of more than \$60	00 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts			s you gave	Value
	per person Person to Whom You Gave the Gift and Address:			the g	ifts	

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4.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or			ns with a tota	l value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy o	r since you filed for bankruptcy, did	you lose anyt	hing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the I le the amount that insurance has paid. Ince claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s				
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not The Law Offices of Nella E. Marian	prepare You		·	Date payment or transfer was made	Amount of payment \$300.00
	600 S County Line Road, Suite 2N Bensenville, IL 60106 nellaep@aol.com	., 1 .0	Authority rees		04/13/2010	ψ300.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer that No Yes. Fill in the details.	ditors	or to make payments to your credito		r transfer any propei	rty to anyone who
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have al	u r busi i s made	ness or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

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Case number (if known)

Debtor 1 Adrienna S Thomas

19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was 				
	Name of trust	Description and v	value of the property	transferred	Date Transfer was made
Par	8: List of Certain Financial Accounts, Ir	nstruments, Safe Deposi	t Boxes, and Storage	Units	
20.	Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accoun	nts; certificates of de	•	•
21.	Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other deposit cash, or other valuables? No Yes. Fill in the details. 				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit No Yes. Fill in the details.	or place other than your	r home within 1 year	before you filed for bankrup	otcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?
Par	9: Identify Property You Hold or Contro	I for Someone Else			
23.	 Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. No Yes. Fill in the details. 				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		cribe the property	Value
	Give Details About Environmental Inf				
For t	he purpose of Part 10, the following definit Environmental law means any federal, stat		ulation concerning p	ollution, contamination, rele	eases of hazardous or

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Adrienna S Thomas

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of a	any release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admi	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or C	connections to Any Business				
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	/ business?		
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compa	any (LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exe	cutive of a corporation				
	☐ An owner of at least 5% of the voting	or equity securities of a corporation				
	■ No. None of the above applies. Go to Pa	art 12.				
	☐ Yes. Check all that apply above and fill i	in the details below for each business	5.			
		Describe the nature of the business	Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or IIIN.		
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	ry, did you give a financial statement t	to anyone about your business? Inclu	ude all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Debtor 1 Adrienna S Thomas Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor 2 Signature of Debtor 1 Date Date April 19, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ No Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1 Adrienna S Thomas

Case number (if known)

Sign	Below
	Sign

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankguptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

	.C. §§ 152, 1341, 1519, and 2571.			
	three flows	Signature of Debtor 2		
Date	April 19, 2016	Date		
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No				
☐ Yes				
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?				
■ No				
☐ Yes.	. Name of Person . Attach the Bankruptcy Peti	tion Preparer's Notice, Declaration, and Signature (Official Form 119).		

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		Docume	Taye 30 01 04		
Fill in this infor	mation to identify your o	2250.			
Debtor 1	Adrienna S Thoma				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Opodoo II, IIIIIg)	i not ramo				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
	dividual filing under chap		ials Filing Under	Chapter	12/15
creditors have	ve claims secured by you	ur property, or			
You must file th	ever is earlier, unless the	ithin 30 days after you fi	oired. ile your bankruptcy petition or efor cause. You must also sen		
	eople are filing together nd date the form.	in a joint case, both are	equally responsible for suppl	ying correct inforr	nation. Both debtors must
•	and accurate as possiblyour name and case num	•	led, attach a separate sheet to	this form. On the	top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's Ally Financial	☐ Surrender the property.	■ No
name:	Retain the property and redeem it.	
Description of 2012 Chevrolet Sonic 92,000	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt: miles Fair Condition (need tune-up, body work)	☐ Retain the property and [explain]:	_
Creditor's Carrington Mortage Service	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of 17253 Park Avenue Lansing, IL	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property 60438 Cook County	Retain the property and [explain]:	
securing debt:	retain property and continue making payments	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Adrienna S Thomas	Case number (if known)
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's		□ No
Description of leased Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Part 3:	Sign Below	
Under pe	nalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
	Adrienna S Thomas	X
	rienna S Thomas nature of Debtor 1	Signature of Debtor 2
Date	e April 19, 2016	Date

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Debtor 1 Adrienna S Thomas	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below Under penalty of perjury, I declare that I have indic property that is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any persona
Adrienna S Thomas Signature of Debtor 1	X Signature of Debtor 2
Date April 19 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Adrienna S Thomas		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	TION OF ATTORN	NEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in	he petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	300.00	
	Prior to the filing of this statement I have received		\$	300.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensati	ion with any other person un	less they are memb	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation vecopy of the agreement, together with a list of the names of				
6.	In return for the above-disclosed fee, I have agreed to render l	legal service for all aspects of	of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] 				
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:					
	CERTIFICATION				
	I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.				
	pril 19, 2016	/s/ Nella E. Mariani			
1	Date	Nella E. Mariani 625	57570		
		Signature of Attorney The Law Offices of	Nella E. Mariani	, P.C.	
		600 S County Line	Road, Suite 2N	, -	
		Bensenville, IL 601 (312) 307-9411 Fax			
		nellaep@aol.com			
		Name of law firm			

PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

I/WE HEREBY RETAIN AND EMPLOY THE LAW OFFICES OF NELLA E. MARIANI, P.C. TO HANDLE MY/OUR CHAPTER 7 BANKRUPTCY. I/WE UNDERSTAND THAT THE FOLLOWING SERVICES WILL BE PROVIDED:

- 1. Initial interview-Explanation of Chapter 7 & Chapter 13 Procedures, evaluation of the clients's financial situation to determine feasibility of filing Chapter 7 or Chapter 13, overview and discussion of various options, situation to determine feasibility of filing Chapter 7 or Chapter 13, overview and discussion of various options, Preparation of Bankruptcy Petition & Schedules, Assistance in procurement of mandatory creditor counseling certificate, obtain a credit report, Filing of Petition and Schedules with the Bankruptcy Court. The above representation is completed upon filing the filing of Bankruptcy Petition and Schedules with the bankruptcy court and said agreement is terminated.
- 2. For said representation, Client (s) agree to pay a retainer fee in the amount of \$\frac{5}{200}\$ c. Co to the above named law office for the above referenced pre-filing legal services, expenses, and court fees. Client hereby understands that any moneys paid for said services, costs and fees are non-refundable once received by said law office. Client(s) further understands that he/she is not entitled to a refund in the event that the bankruptcy petition is not filed with the bankruptcy court.
- 3. Client acknowledges that both parties, The Law Offices of Nella E. Mariani, P.C. and Client(s) enter into this agreement with an understanding that this contract is completed and terminated upon the filing of the petition and Client (s) agrees to enter a second contract for post-petition legal services related to his/her bankruptcy case. Cient(s) further understand that neither the above named law office nor Client(s) are under any obligation to enter in said second agreement and Client may choose to find other representation or represent himself/herself. If Client(s) choose to have THE LAW OFFICES OF NELLA E. MARIANI, P.C. as their representation for post-petition legal services, client agrees to enter in said agreement.

I HEREBY CERTIFY THAT I HAVE READ THIS AGREEMENT IN ITS ENTIRETY:

Dated: 1-19-2019
Client(s)

Nella E. Mariani

CES OF NELLA E. MARIANI, P.C.

United States Bankruptcy Court Northern District of Illinois

In re	Adrienna S Thomas		Case No.		
		Debtor(s)	Chapter	7	
	VERIFICATION OF CREDITOR MATRIX				
		Number of C	Creditors:	38	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	April 19, 2016	/s/ Adrienna S Thomas Adrienna S Thomas Signature of Debtor			

ACL c/o Account Recovery Service, Inc. 3031N. 114th St., Suite 2 Milwaukee, WI 53222

Advocate Medical Group 8550 W. Bryn Mawr, 8th Floor Chicago, IL 60631

Advocate South Suburban Hospital P.O. Box 4251 Carol Stream, IL 60197

All Kids and Familycare P.O. Box 19121 Springfield, IL 62794

Ally Financial P O Box 380901 Bloomington, MN 55438

Ally Financial 200 Renaissance Center Detroit, MI 48243

American Family Insuance 975 N Nerge Road, Suite W30 Roselle, IL 60172

AT & T P.O. Box 5014 Carol Stream, IL 60197

AT & T Uverse c/o IC System P.O. Box 64437 Saint Paul, MN 55164

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899

Capital One Bank Usa N 15000 Capital One Drive Richmond, VA 23238 Carrington Mortage Service 1600 S. Douglas Road Anaheim, CA 92806

Cedar Financial 24009 Ventura Blvd Ste 2 Calabasas, CA 91302

Chase Bank P.O. Box 15145 Wilmington, DE 19850

Com-Ed Attn: Bankruptcy 2100 Swift Drive Oak Brook, IL 60523

Comcast c/o Convergent P.O. Box 9004 Renton, WA 98057

Compton & Broomhead Dental Center 901 Fran-Lin Parkway Munster, IN 46321

Credence Resource Management, LLC P.O. Box 2238 Southgate, MI 48195

Credit One Bank NA Po Box 98872 Las Vegas, NV 89193

Dept Of Education/Nelnet 121 South 13th St Lincoln, NE 68508

Dept Of Education/Neltnet 121 South 13th St Lincoln, NE 68508

Franciscan Alliance 28044 Network Place Chicago, IL 60673 GAFCP 20 N. Wacker Drive, Suite 2275 Chicago, IL 60606

Great American Finance 20 N Wacker Dr Ste 2275 Chicago, IL 60606

Great Lake Pathologists, SC P.O. Box 78420 Milwaukee, WI 53278

Heights Autoworkers Credit Union 21540 Cottage Grove Chicago Heights, IL 60411

Illinois Lending Corporation 100 West Randolph Chicago, IL 60601

Joseph, Mann, & Creed P.O. Box 1270 Twinsburg, OH 44087

Komayatte & Casbon, P.C. 9650 Gordon Drive Highland, IN 46322

Law Offices of Peter Francis Geraci 55 E. Monroe St., Suite 3400 Chicago, IL 60603

Nicor Attn: Bankruptcy Dept. P.O. Box 5407 Carol Stream, IL 60197

Pallotto Dental Care 18610 Burnham Ave, #D Lansing, IL 60438

Quest Diagnostics P.O. Box 7306 Hollister, MO 65673 Radiology Imaging Consultants, SC 75 Remittance Drive, Dept 1324 Chicago, IL 60675

Stat Anesthesia Specialists, LTD 18221 Torrence Avenue, Suite 1B Lansing, IL 60438

Storesmart Chicago Heights 515 W. Lincoln Highway, Unit C Chicago Heights, IL 60411

TCF Bank c/o Millennium Credit Consultants P.O. Box 18160 Saint Paul, MN 55118

Women for Women Health Care, S.C. P.O. Box 896 Richton Park, IL 60471